

09/18/00
U.S. PTO

PTO/SB/05 (1/98)

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UTILITY
PATENT APPLICATION
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 660005.98757

First Inventor or Application Identified Michael C. Barney et al.

Title Use of Hop Acids to Inhibit Growth of S. aureus and Prevent Toxic Shock Syndrome

Express Mail Label No. EK290771473US

APPLICATION ELEMENTS See MPEP Chapter 600 concerning utility patent application contents.		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231	
1 <input checked="" type="checkbox"/> Fee transmittal Form (Submit an original and a duplicate for fee processing) 2 <input checked="" type="checkbox"/> Specification (<i>preferred arrangement set forth below</i>) <ul style="list-style-type: none"> - Descriptive title of the invention - Cross References to Related Applications - Statement Regarding Fed Sponsored R&D - Background of the Invention - Brief Summary of the Invention - Detailed Description - Claim(s) - Abstract of the Disclosure 3 <input type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets <input type="checkbox"/>] 4. Oath or Declaration [Total Pages <input type="checkbox"/>] <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Newly unexecuted (original or copy) b. <input type="checkbox"/> Copy from prior Application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) <p style="text-align: center;">[Note Box 5 below]</p> <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed Statement attached deleting inventor(s) named in prior application. 5 <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference herein.		6 <input type="checkbox"/> Microfiche Computer Program (Appendix) 7. Nucleotide and/or Amino Acid Sequence Submission (<i>if applicable, all necessary</i>) <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer readable Copy b. <input type="checkbox"/> Paper Copy c. <input type="checkbox"/> Statement Verifying identity of above 	
ACCOMPANYING APPLICATION PARTS			
8 <input type="checkbox"/> Assignment Papers (cover sheet & documents) 9 <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (where there is an assignee) 10 <input type="checkbox"/> English Translation Document (<i>if applicable</i>) 11 <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 12 <input type="checkbox"/> Preliminary Amendment 13 <input checked="" type="checkbox"/> Return receipt postcard (MPEP 503) (<i>Should be specifically itemized</i>) 14 <input type="checkbox"/> *Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application Status still proper and desired 15 <input type="checkbox"/> Certified copy of priority Document(s) (<i>if foreign priority is claimed</i>) 16 <input type="checkbox"/> Other: <p style="text-align: center;">* A new statement is required to pay small entity fees, except where one has been filed in a prior application and is being relied upon</p>			
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application no. _____ Prior application information: Examiner: _____ Group/Art Unit: _____			
18. CORRESPONDENCE ADDRESS			
<input type="checkbox"/> Customer Number or Bar Code Label		<input type="checkbox"/> <input checked="" type="checkbox"/> Correspondence address below (Insert Customer No. or Attach bar code label)	
NAME	David M. Kettner Quarles & Brady		
ADDRESS	P O Box 2113		
CITY	Madison	STATE	WI
COUNTRY	US	TELEPHONE	608/251-5000
ZIP CODE	53701-2113		
FAX	608/251-9166		
Name (Print/Type)		Registration No. (Attorney/Agent)	45,589
Signature		Date 9-18-2000	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. QBMAID/225835

FEE TRANSMITTAL

Patent fees are subject to annual revision.
Small Entity payments must be supported by a small entity statement
otherwise large entity fees must be paid. See Forms PTO/SB/09-12
See 37 C.F.R. §§ 1.27 and 1.28

TOTAL AMOUNT OF	\$ 690.00	Attorney Docket Number	660005.98757
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METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number: 17-0055

Deposit Account Name: Quarles & Brady LLP

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.311(b)

2. Payment Enclosed:
 Check Money Order Other

FEE CALCULATION (fees effective 11/10/98)

1. FILING FEE

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
101	690	201	345	Utility filing fee	690.00
106	310	206	155	Design filing fee	
107	480	207	240	Plant filing fee	
108	690	208	345	Reissue filing fee	
114	150	214	75	Provisional filing fee	
SUBTOTAL (1) (\$)					690.00

2. CLAIMS

Total Claims	14	-20**=	0	X	Fee from below	=	Fee Paid
Independent Claims	3	-3**=	0	X		=	

Multiple Dependent Claims

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description
103	18	203	09	Claims in excess of 20
102	78	202	39	Independent claims in excess of 3
104	260	204	130	Multiple dependent claim
109	78	209	39	**Reissue independent claims over original patent
110	18	210	09	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$)				

Complete if Known

Application Number	
Filing Date	herewith
First Named Inventor	Michael C. Barney
Group Art Unit	
Examiner Name	

FEE CALCULATION (continued)

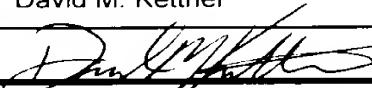
3. ADDITIONAL FEES

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee
105	130	205	65	Surcharge - late filing fee or oath
127	50	227	25	Surcharge - late provisional filing fee or cover sheet
139	130	139	130	Non-English specification
147	2,520	147	2,520	For filing a request for reexamination
112	920	112	920	Requesting publication of SIR prior to Examiner action
113	1,840	113	1,840	Requesting publication of SIR after Examiner action
115	110	215	55	Extension for reply within first month
116	380	216	190	Extension for reply within second month
117	870	217	435	Extension for reply within third month
118	1,360	218	680	Extension for reply within fourth month
128	1,850	228	925	Extension for reply within fifth month
119	300	219	150	Notice of Appeal
120	300	220	150	Filing a brief in support of an appeal
121	260	221	130	Request for oral hearing
138	1,510	138	1,510	Petition to institute a public use proceeding
140	110	240	55	Petition to revive unavoidably abandoned application
141	1,210	241	605	Petition to revive unintentionally abandoned application
142	1,210	242	605	Utility issue fee (or reissue)
143	430	243	215	Design issue fee
144	580	244	290	Plant issue fee
122	130	122	130	Petitions to the Commissioner
123	50	123	50	Petitions related to provisional applications
126	240	126	240	Submission of Information Disclosure Stmt
581	40	581	40	Recording each patent assignment per property (times number of properties)
146	690	246	345	Filing a submission after final rejection (37 CFR 1.129(a))
149	690	249	345	For each additional invention to be examined (37 CFR 1.129(b))

Other fee (specify) _____
Other fee (specify) _____

SUBTOTAL (3) (\$)

Reduced by Basic Filing Fee Paid

SUBMITTED BY			Complete (if applicable)		
Typed or Printed Name	David M. Kettner	Registration No. (Attorney/Agent)	45,589	Telephone No	608/251-5000
Signature		Date	September 18, 2000		